

BEFORE THE BOARD OF MEDICAL EXAMINERS
OF THE STATE OF NEVADA

* * * * *

In The Matter of Charges and)
)
Complaint Against)
)
JOSEPH LOPEZ, M.D.,)
)
Respondent.)

Case No. 10-8697-1

FILED

JAN 26 2010

NEVADA STATE BOARD OF
MEDICAL EXAMINERS

COMPLAINT

The Investigative Committee of the Nevada State Board of Medical Examiners, composed of Sohail U. Anjum, M.D., Chairman, S. Daniel McBride, M.D., Member, and Mr. Van V. Heffner, Member, by and through Edward Cousineau, General Counsel for the Nevada State Board of Medical Examiners, having a reasonable basis to believe that Joseph Lopez, M.D., hereinafter referred to as "Respondent," has violated the provisions of NRS Chapter 630, hereby issues its formal Complaint, stating the Investigative Committee's charges and allegations, as follows:

1. Respondent is licensed in active status to practice medicine in the state of Nevada, and at all times alleged herein, was so licensed by the Nevada State Board of Medical Examiners, pursuant to the provisions of Chapter 630 of the Nevada Revised Statutes.

2. Patient A was a seventy-five-year-old female at the time of the events at issue. Her true identity is not disclosed herein to protect her privacy, but is disclosed in the Patient Designation served on Respondent along with a copy of this Complaint.

3. Patient A was under Respondent's care for a least a month prior to her admission to University Medical Center, located in Las Vegas, on December 26, 2002.

4. Previous to her admission, Patient A had undergone a colonoscopy which revealed evidence of chronic proctocolitis with crypt abscess formation which was suggestive of

1 inflammatory bowel disease. Patient A has also undergone an Esophagogastroduodenoscopy
2 which showed esophagitis and antral gastritis.

3 5. Patient A was admitted to the hospital because of progressive nausea, vomiting,
4 abdominal pain, and diarrhea. After initial evaluation, Patient A was admitted for dehydration
5 with a diagnosis of colitis, esophagitis, and gastritis. On December 27, 2002, Patient A
6 underwent a CT scan due to continuing problems with nausea and diarrhea. The CT scan showed
7 no evidence of an acute process.

8 6. On December 29, 2002, Patient A underwent a colonoscopy which showed
9 marked, severe ulcerative proctocolitis with gross sigmoid perforation and herniation of bowel
10 loops into the sigmoid lumen. In response to these findings, Patient A immediately underwent a
11 total abdominal colectomy and ileostomy, with notations that Patient A's colon was extremely
12 friable with multiple perforations and gross contamination of fecal material in the intra-
13 abdominal cavity.

14 7. Patient A was transferred to the hospital's Intensive Care Unit immediately after
15 the surgical procedure, there she required IV fluid and resuscitation to support her urinary output.
16 Patient A's initial nutritional evaluation showed she was severely malnourished with albumin of
17 1.5. Total parenteral nutrition was initiated on December 30, 2002. That same day, Patient A
18 developed a cardiac arrhythmia/atrial fibrillation. In response, Respondent ordered an infusion of
19 Remicade for Patient A. Patient A remained neutropenic and had difficulty maintaining her
20 nutritional status and a gastrojejunostomy was placed by Respondent on January 3, 2003. On
21 January 5, 2003, Respondent ordered an additional infusion of Remicade for Patient A.

22 8. Patient A continued to suffer post-operatively and required intubation and
23 ventricular support due to her respiratory failure and an abdominal drain was accomplished to
24 remove fluid build up in Patient A's abdominal cavity. Despite these and other rehabilitative
25 efforts, Patient A expired on January 17, 2003.

26 9. Section 630.301(4) of the Nevada Revised Statutes provides that malpractice,
27 defined as the failure to use the reasonable knowledge, skill and expertise ordinarily used in
28 similar circumstances, is grounds for discipline.

10. Respondent committed malpractice in the course of providing care and treatment to Patient A when he initiated Remicade therapy, which is noted for its severe immuno-suppressive effect, within twenty-four hours of colectomy surgery, and further, Respondent failed to initiate parenteral nutrition earlier after it became clear that Patient A was intolerant to attempts to enterally feed her, both of which inhibited Patient A's ability to recover post-operatively, and therefore Respondent is subject to discipline by the Nevada State Board of Medical Examiners as provided in NRS 630.352.

WHEREFORE, the Investigative Committee prays:

1. That the Nevada State Board of Medical Examiners fix a time and place for a formal hearing;

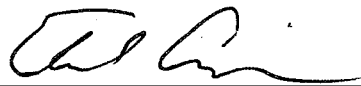
2. That the Nevada State Board of Medical Examiners give Respondent notice of the charges herein against him, the time and place set for the hearing, and the possible sanctions against him;

3. That the Board determine what sanctions it deems appropriate to impose for the violation committed by Respondent; and

4. That the Board make, issue and serve on Respondent its findings of facts, conclusions of law and order, in writing, that includes the sanctions imposed.

DATED this 26th day of January, 2010.

By: _____



Edward Cousineau
Attorney for the Investigative Committee of the
Nevada State Board of Medical Examiners

CERTIFICATE OF MAILING

I hereby certify that I am employed by Nevada State Board of Medical Examiners and that on 26th day of January 2010, I served a file copy of the COMPLAINT, PATIENT DESIGNATION, copy of Appointment Letter and Fingerprint Information, by mailing USPS certified mail to the following:

Joseph Lopez, M.D.
7106 Smoke Ranch Rd.
Las Vegas, NV 89128

Dated this 26th day of January 2010.



Angelia L. Donohoe
Legal Assistant